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APPLICANTS

John L. Freiler, Somerset, NJ;

** CONTINUING DATA ***** *None*** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>RL</i> Examiner's Signature	Initials		

ADDRESS

000055547
 R. GALE RHODES, ESQ. / MOSER IP LAW GROUP
 1040 BROAD STREET
 2ND FLOOR
 SHREWSBURY , NJ
 07702

TITLE

Pressure relief valve

FILING FEE RECEIVED 471	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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